

REQUEST FOR QUOTATION (THIS IS NOT AN ORDER)		THIS RFQ <input checked="" type="checkbox"/> IS <input type="checkbox"/> IS NOT A SMALL BUSINESS SET ASIDE		PAGE 1 OF 11 PAGES
1. REQUEST NO. N00173-07-Q-0097	2. DATE ISSUED 7/27/07	3. REQUISITION/PURCHASE REQUEST NO. 63-5043-07	4. CERT. FOR NAT. DEF. UNDER BDSA REG. 2 AND/OR DMS REG. 1	RATING
5a. ISSUED BY Supply Officer, Naval Research Laboratory, Wash DC 20375			6. DELIVERY BY (Date)	
5b. FOR INFORMATION CALL (NO COLLECT CALLS)			7. DELIVERY	
NAME Lillian Moore, Code 3411		TELEPHONE NUMBER AREA CODE 202 NUMBER 767-3320		<input checked="" type="checkbox"/> FOB DESTINATION <input type="checkbox"/> OTHER (See Schedule)
8. TO:			9. DESTINATION	
a. NAME To All Quoters		b. COMPANY		a. NAME OF CONSIGNEE Naval Research Laboratory
c. STREET ADDRESS			b. STREET ADDRESS 4555 Overlook Ave SW	
d. CITY			c. CITY Washington	
e. STATE		f. ZIP CODE		d. STATE DC
				e. ZIP CODE 20375
10. PLEASE FURNISH QUOTATIONS TO THE ISSUING OFFICE IN BLOCK 5A ON OR BEFORE CLOSE OF BUSINESS (date) 8/06/07		IMPORTANT: This is a request for information and quotations furnished are not offers. If you are unable to quote, please so indicate on this form and return it to the address in Block 5A. This request does not commit the Government to pay any costs incurred in the preparation of the submission of this quotation or to contract for supplies or services. Supplies are of domestic origin unless otherwise indicated by quoter. Any representations and/or certifications attached to this Request for Quotations must be completed by the quoter.		

11. SCHEDULE (Include applicable Federal, State and local taxes)

ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)
	See Attached Continuation Sheet				

12. DISCOUNT FOR PROMPT PAYMENT:	a. 10 CALENDAR DAYS (%)	b. 20 CALENDAR DAYS (%)	c. 30 CALENDAR DAYS (%)	d. CALENDAR DAYS
				NUMBER PERCENTAGE

NOTE: Additional provisions and representations ☐ are ☐ are not attached.

13. NAME AND ADDRESS OF QUOTER			14. SIGNATURE OF PERSON AUTHORIZED TO SIGN QUOTATION		15. DATE OF QUOTATION
a. NAME OF QUOTER			16. SIGNER		b. TELEPHONE
b. STREET ADDRESS					
c. COUNTY					
d. CITY	e. STATE	f. ZIP CODE	c. TITLE (Type or print)		NUMBER

Previous edition not usable

STANDARD FORM 18 (Rev. 6-95)
Prescribed by GSA - FAR 48 (CPR) 53.215-1(a)

STANDARD FORM 36 JULY 1966 GENERAL SERVICES ADMINISTRATION FED. PROC. REG. (41 CFR) 1-16.101		CONTINUATION SHEET		REF. NO. OF DOC. BEING CONT'D N00173-07-Q-0097		PAGE OF 2 11	
NAME OF OFFEROR CONTRACTOR							
All Quoters							
ITEM NO.	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT		
0001	Non-Recurring Process Development for Hierarchical Rod, Bundle Filament Winding per the attached Statement of Work (Attachment #1) and the attached Drawings (Attachment #2).	1	ea				
0002	Potting, Winding and Curing of Rod Bundles	46	ea				
<p>If available please include a published price list or cost breakdown and return the RFQ package to the following fax number: 202-767-1708</p> <p>Any questions concerning this Request for Quotation (RFQ) must be emailed to SolQnA@condor.nrl.navy.mil at least five (5) days before closing date shown in Block 10 on Page 1 of this RFQ.</p>							